

Department Overview

Presentation to Senate Health and Human Services Committee

January 12, 2024



Overview

About the Department + Organizational Structure Public Health Investment Emergency Medical Services: Sustainability Report + Key Findings Healthcare Workforce Initiatives Family and Community Health Updates: CHW Program, Wellness on Wheels Bright Start Initiative Medical Cannabis Program Overview + Key Stats DOH Legislation + Priorities



About the SD Department of Health

Mission Statement: Working together to promote, protect, and improve the health and well-being of all South Dakotans.

Core Values: Integrity, science and research, health equity, collaboration, and innovation.

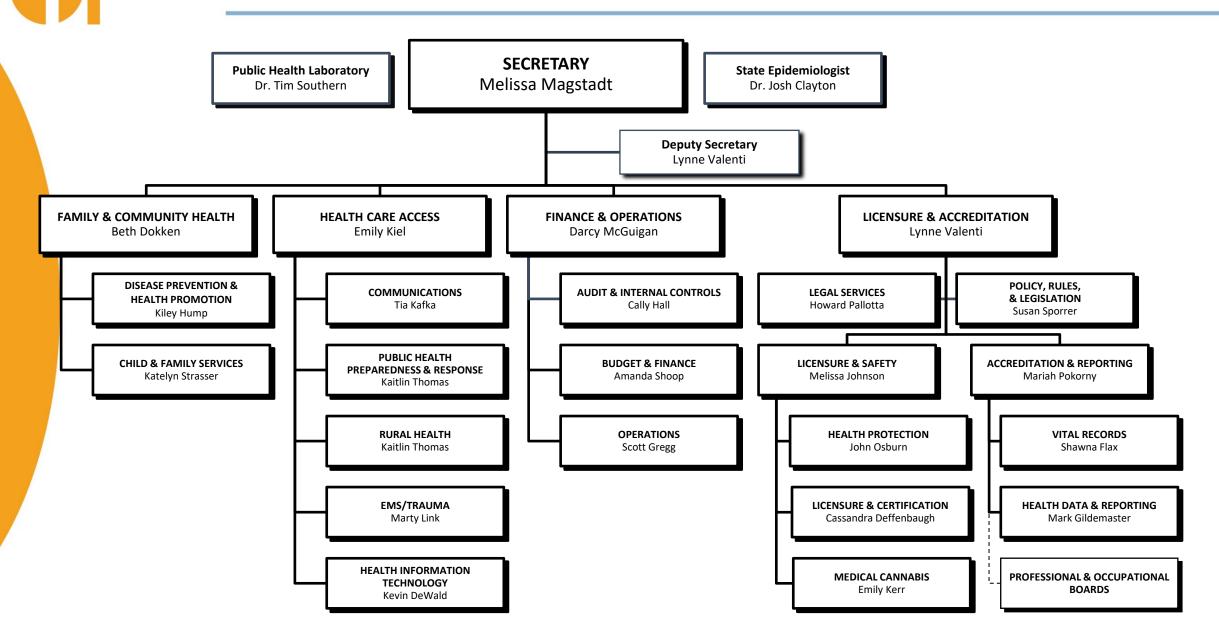
Key Functions and Responsibilities:

- Monitoring and responding to public health issues and trends.
- Implementing health promotion and disease prevention programs.
- Conducting public health research and policy development.
- Collaborating with local, state, and federal partners to improve health outcomes.

Strategic Goals:

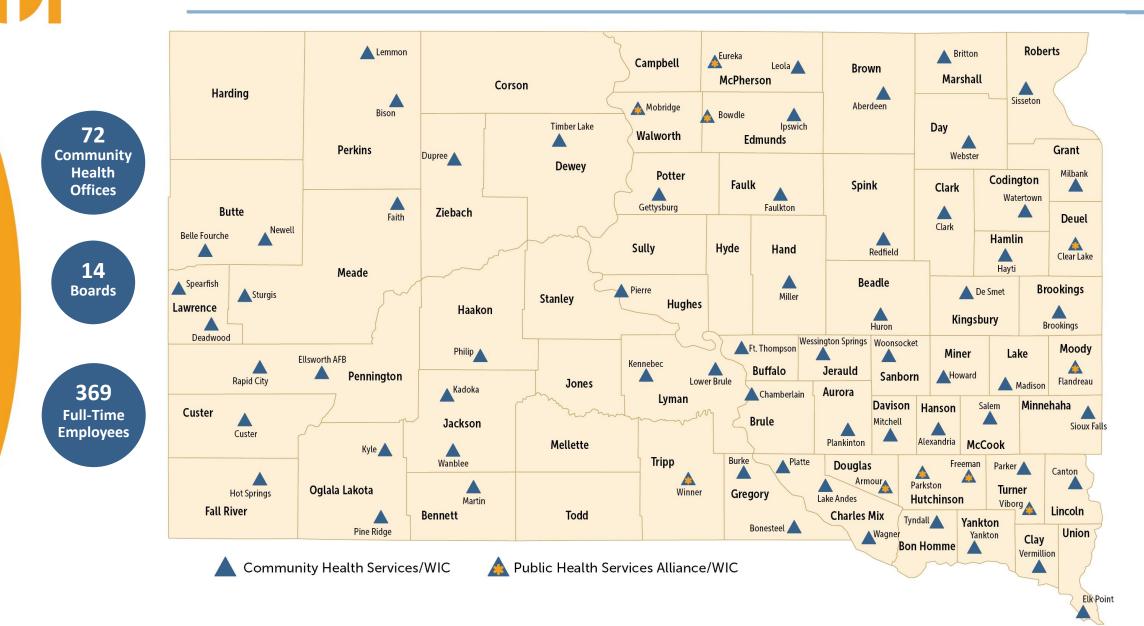
- Enhance healthcare accessibility and improve health outcomes for all residents.
- Strengthen public health systems and infrastructure.
- Advance health equity and reduce health disparities.
- Foster innovation in healthcare delivery and health promotion.

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Organizational Structure

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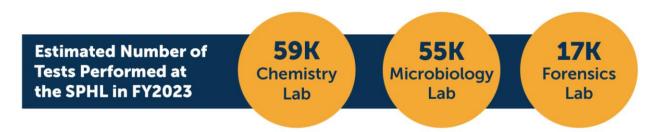


Public Health Investment



State Public Health Laboratory: Protecting South Dakota's Health

Dedicated to ensuring public health through high-quality testing services, including testing for infectious diseases, water safety, drugs of abuse, and medical cannabis.



Department of Health Campus

The new Department of Health Workforce Development and Education Center will include contemporary and efficient laboratory and administrative space, as well as space for workforce development, education, and other resources for community engagement.



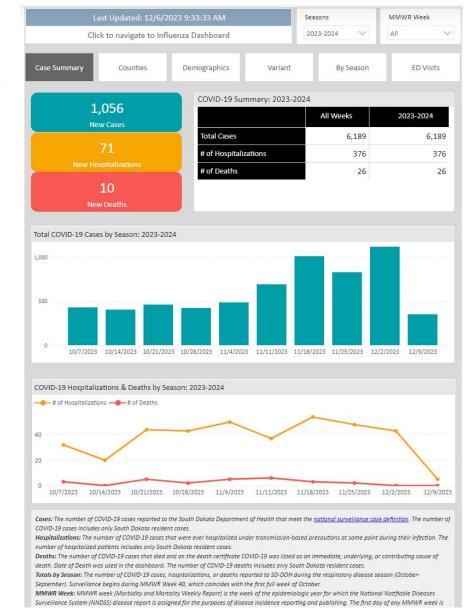
"Ensuring the health and safety of South Dakotans through dedicated laboratory services."

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Epidemiology

Impact of Epidemiology, Surveillance, and Informatics (ESIC)

- Data Dashboards: Successful expansion of publicly available dashboards, which offer interactive, comprehensive data on cases and deaths.
 - Infectious Disease Monthly
 - Influenza
 - COVID-19 & Other Respiratory Virus Diseases (CORVD)
 - West Nile Virus
- Other DOH Program Dashboards:
 - Infant Mortality
 - Overdose
 - School Immunizations
 - Suicide



Nexus SD: Enhancing Health and Social Care Coordination

- Statewide collaboration of healthcare, human service, and social service providers.
- Integrated technology and referral system for whole-person care coordination, streamlining connections between multi-sector providers.
- Focus on addressing social needs and driving positive outcomes, especially for high-risk and underserved populations.
- Key partnerships include Findhelp, America's leading social care network provider, and the Helpline Center, South Dakota's 211 and 988 service provider.
- Two platforms for organizations and clients, providing resources, screening tools, social care history, and referrals in over 100 languages.



Connecting People. Driving Outcomes.

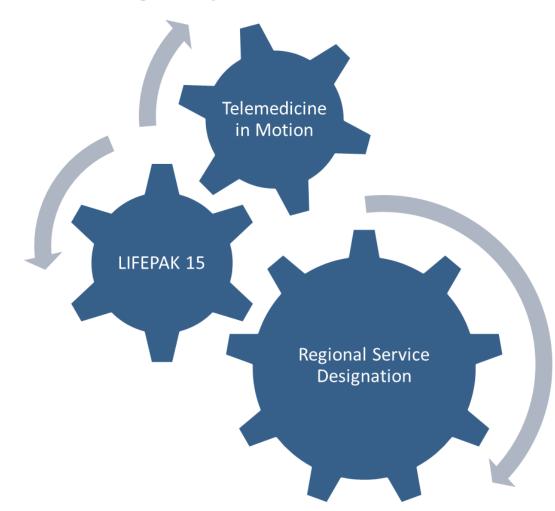


Emergency Medical Services + Sustainability Report and Findings





Emergency Medical Services



Regional Services Designation | Overview

The role of the Regional Service Designation initiative is to complete a comprehensive analysis of the state of EMS as it stands today.

Primary Goal - Create a pre-hospital system of care that ensures long-term sustainability.

- 1. Statewide Comprehensive assessment + final report
- 2. Grant application and funding opportunity
 - DOH will provide \$7.5 million in planning grant opportunities to support the planning, development, and implementation of regional EMS hubs.



Regional Services Designation | Stakeholder Input

400 stakeholder interviews in 8 months:

- Each Ambulance District (7)
- State 911 Dispatch
- State Medical Director + District Medical Directors
- Health Systems
- Annual Conferences
 - South Dakota Ambulance Association
 - South Dakota EMS Association
 - Statewide Trauma Conference
- Virtual Interviews + Listening Sessions

Regional Services Designation | Testimonies

FROM THE FIELD:

"We may have 15 volunteers on our staff, but when the bell rings it's the same 3 people who show up."

"I can get folks to run the 911 wreck, but it may take a day or two to get someone to take a long-distance hospital transport."

"Folks leave town to work, so when a call comes in, they aren't close enough to run the call – even if their employer would let them go."

"Medical direction is not consistent from one organization or geographic location."



Regional Services Designation | Key Findings

Workforce Challenges

- Recruitment and retention are the greatest challenges facing ambulance sustainability in South Dakota.
- Require mutual response with fire departments.
- Promote grants for services to purchase auto-loading gurneys to extend the working tenure of volunteers.
- Create possible legislation to incorporate CPR and other life-saving training for all South Dakota middle and high school students and offering college-level credits for high school students who complete emergency medical technician training.
- Improve test scores and passing rates for the National Registry of EMT Examination by offering more instruction and support to potential volunteers.

Regional Services Designation | Key Findings Short Term (less than 2 years)

- Unawareness of the EMS profession
- Minimal state on-site interaction
- Lack of report-writing skills
- Lack of continuous quality improvement and statewide metrics
- Lack of EMS medical director coordination

Medium Term (2-4 years)

- Inter-facility transports are delayed
- Lack of formal recruitment drives
- Not all dispatch centers use Emergency Medical Dispatching
- Students are not passing the National Registry of EMT Examination
- Lack of volunteers

Long Term (4 years or more)

Patients transported unnecessarily

Regional Services Designation | Best Management Practices

Best management practices include, but are not limited to the following:

- Flexible state staffing requirements (i.e., not requiring the driver to be an EMT);
- Implementation of Telemedicine in Motion (90 sites live);
- LIFEPAK monitors (distributed 308) statewide;
- Statewide use of Image Trend's electronic patient care reporting system at no cost to providers for EMS data collection to drive system design, improvements, and clinical education.

Regional Services Designation | Planning Grants

Goal: to devise long-term sustainable EMS systems within the respective districts.

Things to Know:

- Competitive grant opportunity with each grant award limited to \$500,000 in funding.
- Applicants must be knowledgeable in the report findings + incorporate components into their grant application.
- Grant recipients must comply with state and federal grant guidance.
 - Furthermore, all grant recipients will be responsible for submitting monthly progress reports and invoices.
 - Funds awarded must be spent by November 1, 2026.
- **Examples could include:** emphasis on the development and implementation of regional hubs, billing software solutions, supply procurement systems, etc. Grant funding may not be used for physical infrastructure, technology not related to EMS, food or beverages.
- Timeline we will open up the grant application next Tuesday, Jan. 16.
 - July 1 at least 6 grants executed per DOH Strategic Plan
 - Late Summer/Early Fall open up another grant application period



Healthcare Workforce Initiatives



Strengthening Rural Health & the Healthcare Workforce

- Healthcare Workforce Recruitment Initiatives includes recruitment incentives and healthcare career camps, targeting workforce development and improved healthcare delivery in rural communities.
 - 80 healthcare professionals received recruitment incentives in 2023.
 - Over 45 rural communities benefited from recruitment initiatives.
 - Approximately 3,000 students were reached through health career camps.
- The Rural Health Strategic Analysis consists of a comprehensive assessment across the state with stakeholder sessions and qualitative/quantitative data collection to address healthcare needs in underserved areas.
- 2024 Healthcare Revolution Summit will be held August 12-13 in Pierre to provide professionals across the state
 information and education on the generational shifts in healthcare hiring and retention practices along with healthcare
 delivery. The South Dakota Department of Health will deliver relevant and innovative solutions to ensure that you will be
 able to stretch teams without burning them out, while empowering leadership to grow as well. It has never been more
 critical to work together to build our South Dakota healthcare pipeline.

Strengthening Rural Health & the Healthcare Workforce

State Loan Repayment Program | 2023 Applicant Pool

PROVIDER TYPE	AWARDEES	NUMBER OF APPLICANTS
NURSE PRACTITIONER	8	23
SOCIAL WORKER	7	12
PROFESSIONAL COUNSELOR	3	18
REGISTERED NURSE	1	40
SUBSTANCE USE DISORDER COUNSELOR	1	23
DENTIST	0	1
PHARMACIST	0	1
PHYSICIAN	0	1
PHYSICIAN ASSISTANT	0	2
PSYCHIATRIC NURSE SPECIALIST	0	0
DENTAL HYGIENIST	0	4
TOTAL	20	125

PHIG STRATEGIES

Enhancing Public Health Systems: The Impact of the PHIG

In 2022, SD DOH received over \$10 million from the CDC to help support and strengthen the public health systems. Award amounts were based on a funding formula that included population size and community resilience.

STRATEGIES	SHORT-TERM OUTCOMES	LON-TERM OUTCOMES	
Workforce Recruit, retain, support, and train the public health workforce	Increased hiring of diverse public health staff	Increased size of the public health workforce	Accelerated prevention,
Foundational Capabilities Strengthen systems, processes, and policies	Improved organizational systems and processes	Stronger public health foundational capabilities	preparedness, and response to emerging health threats, and improved outcomes
Data Modernization Deploy scalable, flexible, and sustainable technologies	More modern and efficient data infrastructure Increased data interoperability	Increased availability and use of public health data	for other public health areas.



Family and Community Health Services





The Impact of Community Health Workers/Community Health Representatives

- 115 Community Health Workers (CHWs) across SD
- DOH partnered with 63 CHW sites in 2023
- CHWs receive comprehensive training with a focus on:
 - □ culturally competent care
 - population determinants of health
 - enhancing access to care
- Community Health Representative (CHR) training scholarships
- DOH now has three certified CHWs



The 2nd annual CHW conference, held in May 2023, attracted more than 300 CHWs/CHRs.

Enhancing Access to Public Health: Wellness on Wheels

- Launches in Spring 2024 with five mobile units
- Focus on underserved, high-risk populations
- Provide comprehensive range of public health programs
- Partner sites being established

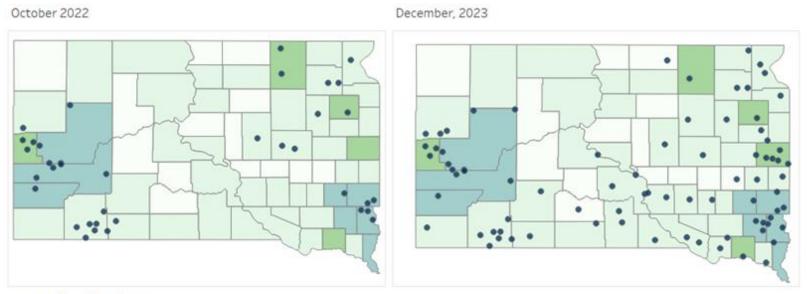




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Families First: Home Visiting Initiative

- Families First implementation
- Bright Start achievements
- Timepoint comparison of families enrolled in Bright Start:



County Classification

- Metropolitan area of population <250,000
- Urban population of 20,000 or more
- Urban population of 2,500 to 19,999
- Completely rural population of <2,500



Medical Cannabis Program



Medical Cannabis Program

As of 12/27/23, a total of 13,134 approved patient applications and 713 caregiver cards had been approved with only one revocation. There are a total of 145 certified establishments. The following charts depict the number and type of certified practitioners and establishments and show the overall progression of approved patients.

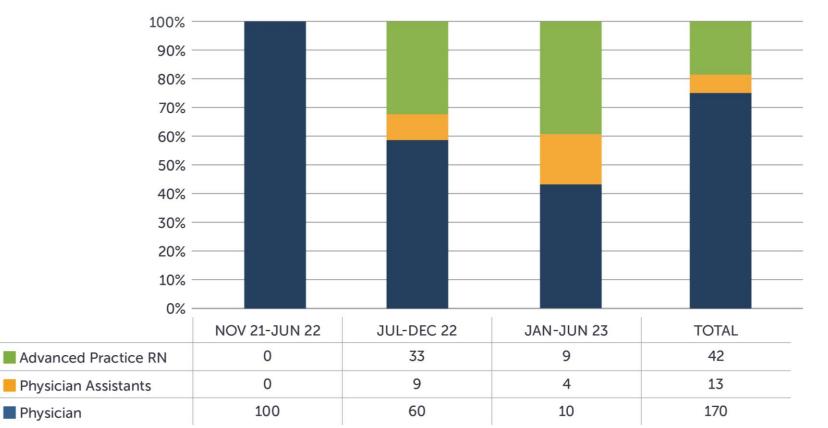


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Medical Cannabis Program







As of 12/27/23, there are 13,134 approved patients. There are eight approved conditions and of those eight, the following were the most commonly used by practitioners:

- 1. Cancer (various types)
- 2. Chronic Pain
- 3. Seizures
- 4. Multiple Sclerosis
- 5. Severe Muscle Spasms

Medical Cannabis Program



Inspections

The following inspections were completed between February and June 2023.

Dispensaries	15
Cultivation	11
Manufacturer	8
Testing Facilities	0

The 10 most common rule violations cited during an inspection:

- 44:90:04:16. Record-keeping Use of inventory tracking system – Training requirements
- 2. 44:90:04:07. Placement of security cameras
- 3. 44:90:10:01 (07-14). Labeling
- 44:90:03:05 (9). Operating procedures Required contents
 All medical cannabis establishments
- 44:90:11:01. Inventory tracking Requirements and procedures
- 44:90:04:11. Agent identification badges to be provided by establishments
- 44:90:03:05 (2). Operating procedures Required contents
 All medical cannabis establishments
- 44:90:11:09. Dispensary inventory records Additional requirements
- 9. 44:90:04:19. Transport manifests Form and content
- 10. 44:90:05:02. Packaging and labeling cannabis for retail sale



DOH Legislation + Priorities



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2024 DOH Legislation

SB 42– An Act to modify provisions related to medical cannabis.

SB 43– An Act to establish procedures for the imposition of fines and probation against medical cannabis establishments, and to increase the allowable fee for a medical cannabis establishment registration certificate.

SB 44– An Act to make an appropriation to reimburse health care professionals who have complied with the requirements for health care recruitment assistance programs, and to declare an emergency.

SB 63– An Act to revise provisions related to the licensure and regulation of ambulance services.

SB 64– An Act to revise provisions related to the regulation of emergency medical services and associated personnel.

HB 1027 – An Act to modify substances listed on the controlled substances schedule and to declare an emergency.

HB 1028– An Act to classify xylazine as a Schedule III controlled substance, establish permissible uses, and to declare an emergency.

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DOH Roadshow



